

Name of Offering

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

([] check if this is an amendment and name has changed, and indicate change.)

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response . . . 16.00

SEC USE ONLY						
Prefix		Serial				
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DATE RECEIVED						
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• • • • • • • • • • • • • • • • • • • •	[] Rule 504	[] Rule 505	[X] Rule 500	6 [] Section 4(6)	[] ULOE		
ype of Filing: [] New Filing	[X] A	Amendment					
	A. BASI	C IDENTIFICATION	N DATA				
nter the information requested about the iss	uer		**				
ame of Issuer ([]) check if th hatham Asset High Yield Offshore Fund,		t and name has ch	anged, and indica	ate change.)			
ddress of Executive Offices (Numb to Admiral Administration Ltd., Admiral F rand Cayman, KY1-1208 Cayman Islands			ممدا	ephone Number 5) 949-0704	07081951		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same As Above			, ,	Telephone Number (Including Area Code) Same As Above			
rief Description of Business evesting and trading securities and/or oth und, Ltd. (the "Master Fund").	ner financial instru	uments, directly o	r indirectly throu	igh Chatham Asset	High Yield Master		
ype of Business Organization Corporation	[] limited par	tnership, already fo	rmed [X] other (please spe ayman Islands exen	ecify):		
business trust		tnership, to be form	ed		11100E99E		
ctual or Estimated Date of Incorporation or t	Organization:	Month/Year 12/2003	[X] Actual	[] Estimated	NOV 0 6 2007		
urisdiction of Incorporation or Organization:		U.S. Postal Servic FN for other foreign	e abbreviation for		THOMSON THOMSON		
NERAL INSTRUCTIONS					FINANCIAL		
eral:							

requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

States registered or certified mail to that address.

signed copy or bear typed or printed signatures.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

(SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) Chatham Asset Management, LLC (the "In	vestment Manager")			
Business or Residence Address (Numb 40 Main Street, Suite 204, Chatham , NJ 07	er and Street, City, State, Zip 7928	Code)		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[X] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) Melchiorre, Anthony				
Business or Residence Address (Numb c/o Chatham Asset Management, LLC, 40	er and Street, City, State, Zip Main Street, Sulte 204, Cha			
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) O'Malley, Kevin				
Business or Residence Address (Numb c/o Chatham Asset Management, LLC, 40	er and Street, City, State, Zip Main Street, Suite 204, Cha	Code) tham, New Jersey 07928	<u> </u>	·
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) BowrIng, Christopher				
Business or Residence Address (Numb c/o International Management Services Lt	er and Street, City, State, Zipd., P.O. Box 61, Harbour Ce		Cayman B.W.I.	
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) Byrne, Martin				
Business or Residence Address (Numb c/o International Management Services Lt	er and Street, City, State, Zind., P.O. Box 61, Harbour Ce		Cayman Cayman I	slands
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) Goodall, lan				
Business or Residence Address (Numb	er and Street, City, State, Zipd., P.O. Box 61, Harbour Ce		Cayman Cayman l	slands B.W.I.

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	B. INFORMATION ABOUT OFFERING			
1.		Yes []	No [X]	
2.	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?			
3.	Does the offering permit joint ownership of a single unit?	Yes [X]	No []	
4.				
	ull Name (Last name first, if individual) ot applicable.			
_	usiness or Residence Address (Number and Street, City, State, Zip Code)			
Na	ame of Associated Broker or Dealer			
Str	tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
	Check "All States" or check individual States)			
:	AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN []	.l Stat HI [] MS []	ID [] MO []	
		OR [] WY []		
Fu	ull Name (Last name first, if individual)			
Bu	usiness or Residence Address (Number and Street, City, State, Zip Code)			
Na	ame of Associated Broker or Dealer			
	tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)			
	AL[] AK[] AZ[] AR[] CA[] CO[] CT[] DE[] DC[] FL[] GA[]	l Stat HI [] MS []	ID []	
		OR [] WY []		
_	ull Name (Last name first, if individual)			
Bu	usiness or Residence Address (Number and Street, City, State, Zip Code)		· · · · · · · · · · · · · · · · · · ·	
Na	ame of Associated Broker or Dealer			
	tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	3 5		
:	AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] OH [] OK []	1 Stat HI [] MS [] OR [] WY []	ID [] MO [] PA []	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold <u>0</u> \$ 0 0 \$ 0 □ Common □ Preferred \$ 0 S Other (Specify: common shares, par value \$0.01 (U.S.) per share (the "Interests"))......\$ 1.000.000.000(a) \$ 1.219.918.611 Total \$ 1,000,000,000(a) \$ 1,219,918,611 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number **Dollar Amount** of Purchases Investors Accredited Investors <u> 125</u> 1,219,918,611 Non-accredited Investors 0 0 Total (for filings under Rule 504 only)..... \$ N/A N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of **Dollar Amount** Security Sold Rule 505 N/A <u>0</u> Regulation A..... N/A \$ Rule 504 <u>0</u> N/A Total N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. X Transfer Agent's Fees X Printing and Engraving Costs 区 Legal Fees 35,000 Accounting Fees \mathbf{x} \$ 7,500 Ø Engineering Fees..... 0 X Sales Commissions (specify finders' fees separately)..... \square Other Expenses (identify filing fees_____)...... \$

Total

50.000

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⁽a) Open-ended fund; estimated maximum aggregate offering amount.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C -Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer.".....

999,950,000 \$

Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes below. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjustment gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers.						
		Directors, & Affiliates			Payments to Others		
Salaries and fees	×	\$	<u>0</u>	X	\$	<u>o</u>	
Purchase of real estate	X	\$	<u>0</u>	X	\$	<u>0</u>	
Purchase, rental or leasing and installation of machinery and equipment	凶	\$	<u>0</u>	X	\$	<u>0</u>	
Construction or leasing of plant buildings and facilities	X	\$	<u>0</u>	X	\$	<u>0</u>	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	(X)	\$	<u>o</u>	X	\$	<u>0</u>	
Repayment of indebtedness	X	\$	<u>o</u>	X	\$	<u>o</u>	
Working capital	X	\$	<u>0</u>	Ø	\$	<u>0</u>	
Other (specify): Portfolio Investments	X	\$	<u>0</u>	X	\$	999,950,000	
Column Totals	X	\$	<u>o</u>	X	\$	999,950,000	
Total Payments Listed (column totals added)	図		\$ <u>99</u>	9,95	0,00	<u>)0</u>	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Date Issuer (Print or Type) Signature \ Chatham Asset High Yield Offshore Fund, 10/29/07 Ltd. Title of Signer (Print or Type) Name (Print or Type) Director of the Issuer

Anthony Melchiorre

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)